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APPLICATION NUMBER

FILING OR 371 (c) DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NUMBER

10/840,124

05/06/2004

David Simpson

8594560/28580

26386

DAVIS, BROWN, KOEHN, SHORS & ROBERTS, THE FINANCIAL CENTER

666 WALNUT STREET SUITE 2500

DES MOINES, IA 50309-3993



**CONFIRMATION NO. 7243** 

FORMALITIES LETTER

\*OC000000013203421\*

Date Mailed: 07/12/2004

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

## **Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
   A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

## **SUMMARY OF FEES DUE:**

Total additional fee(s) required for this application is \$130 for a Large Entity

• \$130 Late oath or declaration Surcharge.

Replies should be mailed to:

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Commissioner for Patents

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Alexandria VA 22313-1450

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DAVIS, BROWN, KOEHN SHORS & ROBERTS, P.C.

09/17/2004 AWONDAF1 00000099 10840124

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A copy of this notice MUST be returned with the reply.

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PART 2 - COPY TO BE RETURNED WITH RESPONSE

SEP 1 6 2004 #

Under the Paper Reduction Act of 1995, no p	ersons		t and Trad	emark Office; U.S	PTO/SB/21 (04-04) rough 07/31/2006. OMB 0651-0031 S. DEPARTMENT OF COMMERCE solays a valid OMB control number.					
RADEMARIE	Application Number		10/840,124							
TRANSMITTAL	Filing Date	May 6,	2004							
FORM	First Named Inventor	Simpso	on, David							
(to be used for all correspondence after initial filing)		Art Unit	3652							
	Examiner Name	unknow								
Total Number of Pages in This Submission	6	Attorney Docket Number	782403							
ENCLOSURES (Check all that apply)										
Fee Transmittal Form  Fee Attached		Drawing(s) Licensing-related Papers		to Te	Allowance communication chnology Center (TC) all Communication to Board					
Amendment / Reply		Petition		☐ Appe	peals and Interferences eal Communication to TC eal Notice, Brief, Reply Brief)					
After Final Affidavits/declaration(s)		Petition to Convert to a Provisional Application Power of Attorney, Revocation			rietary Information					
Extension of Time Request		Change of Correspondence Ad Terminal Disclaimer	aress		r Enclosure(s) (please ify below):					
Express Abandonment Request		Request for Refund		Return Post	Return Postcard					
Information Disclosure Statement		CD, Number of CD(s)								
Certified Copy of Priority Document(s)	Rem	arks			•					
Response to Missing Parts/ Incomplete Application										
Response to Missing Parts under 37 CFR 1.52 or 1.53										
SIGNA	TURE	OF APPLICANT, ATTORN	EY, OR	AGENT						
Firm or Individual name Signature Date September 13, 2004	bn									
CERTIFICATE OF TRANSMISSION/MAILING										
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.										
Typed or printed name										
Signature Vii D.	1/4	utsinger		Date	September 13, 2004					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0039

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PANENT BERT		Complete if Known							
FEE TRANSMITTAL				tion Num	nber	10/840,124			
				ate		5/6/2004			
for FY 2004				med Inv	entor	Simpson, et al.			
Effective 10/01/2003. Patent fees are subject to annual revision.				er Name	)	unknown			
Applicant Claims small entity status. See 37 CFR 1.27				t		3652			
TOTAL AMOUNT OF PAYMENT (\$) 130 00		Attorney Docket No.			7824030/28580				
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES								
✓ Deposit Account	Fee	Fee Fee	Fee	Fee Fee		Fee De	scription		Fee Paid
Deposit 40 0050	Code 1051	(\$) 130	2051	(\$) 65	Sumba	urcharge – late filing fee or oath			130.00
Account Number	1051	130	2051 65 Surcharge – late filling ree or oath						
Deposit Account Name Davis, Brown, Koehn, Shors & Roberts, P.C.	1052	50	2052	25	Surcha cover	rge – late provis sheet			
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-E	nglish specificati			
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520		ng a request for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*		esting publication of SIR prior to			
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Reque	esting publication of SIR after iner action			
FEE CALCULATION	1251	110	2251	55	Extens	ion for reply with	nin first month		
1. BASIC FILING FEE	1252	420	2252	210	Extens	ion for reply with	nin second mon	th	
Large Entity   Small Entity	1253	950	2253	475	Extens	ion for reply with	nin third month		
Fee Fee Fee Fee <u>Fee Description</u> Fee Paid	1254	1,480	2254	740	Extens	ion for reply with	nin fourth month	ı	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extens	ion for reply with	nin fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice	of Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a	brief in support	of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145		st for oral hearin	-		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510		to institute a pu		eding	
SUBTOTAL (1) (\$)	1452 1453	110 1,330	2452	55 665		n to revive – una n to revive – unir			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665		ssue fee (or reis			
Fee from	1502	480	2502	240	Design	issue fee			
Extra Claims below Fee Paid  Total Claims -20**= X =	1503	640	2503	320	Plant is	sue fee			
Independent Claims X = X	1460	130	1460	130	Petitio	ns to the Commi	ssioner		
Multiple Dependent	1807	50	1807	50	Proces	sing fee under 3	37 CFR 1.17(q)		
Large Entity   Small Entity	1806	180	1806	180	Submi	ssion of Informat	tion Disclosure	Stmt	
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40		ling each patent y (times number o		r	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a	submission afte R 1.129(a))	er final rejection	1	
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385		ch additional invited (37 CFR 1.1			
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Reques	at for Continued E	xamination (RCI	E)	
1204 86 2204 43 **Reissue independent claims over original patent	1802	900	1802	900		st for expedited a sign application			
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent		,	•						
SUBTOTAL (2) (\$)	Other	fee (spe	ecify)						
** or number previously paid, if greater; For Reissues, see above	*Reduc	ed by Bas	asic Filing Fee Paid			SUBTOTAL (3) (\$) 1		(\$) 130.0	0
SUBMITTED BY Complete (if applicable)									
Name (Print/Type) Kent A. Herink -		gistration i tomey/Agi		3102	5		Telephone	515-28	8-2500
Signature Class							Date	9/13/04	

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